## RECEIVED CENTRAL FAX CENTER

AUG 1 8 2008

FEE TRANSMITTAL		Complete if					
for FY 2007		Application Number 09/895,557					
Petent fees pro subject to annual revision.	Filing Date  First Named Inventor  Andrew V. Anderson						
	First Named Inver			oπ			
Applicant claims small entity status. See 37 CFR 1.27.	Examiner Name		ng, Dohm				
TOTAL AMOUNT OF PAYMENT (\$) ().00	Art Unit Attorney Docket N	2152 lo. 42390P97	7667				
	· ttorrey occuter.	4239019	/03A				
METHOD OF PAYMENT (check all that apply)	METHOD OF PAYMENT (check all that apply)						
□ Check □ Credit card □ Money Order ☒ None □ Other (please identify):							
Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman I.I.P							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below		any overpayments					
Charge fee(s) indicated below, except for the filing fee Any concurrent or future reply that requires a petition for							
Charge any additional fee(s) or underpayment of fee(s)	s) extension	on of time should l	be treated as	incorporating an			
during the pendency of this application.	appropr		ctension of t	ime and all required			
fees should be charged.							
FEE CALCULATION							
1. EXTRA CLAIM FEES Extra Feafrom Chams below Fee Paid							
Total Claims 37 39° 0 x 50.00 = 50.00							
Independent 5 6° = 0 x 210.00 = \$0.00							
Multipla Dependent =							
Large Entity   Small Entity							
Foo Fee Fee Foo Ego.Dossoriadion							
Code (\$) Code (\$) 1202 50 2202 25 Claims in excess of 20							
1201 210 2201 103 Independent claims in excess of 3							
1203 370 z203 185 Multiple Dependent claim, if not paid 1204 810 2204 405 "Reissus independent claims over original patent	***	and the second second second second second		. ,			
1205 810 2205 405 "Reissue claims in excess of 20 and over original pat	tent	number proviously paid, if	greater, nor Heiss	uas, see bolow			
SUBTOTAL (1) (5) 0.00							
2. ADDITIONAL FEES Large Entity Small Entity				i			
For For Fee Fee							
Code (\$) Code (\$) Fee Description		_ <u>Fe</u>	e Paid				
1051 130 2051 65 Surcharge - tate filing fco or outh	4						
2053 130 2053 130 Non-English specification	1052 50 2052 25 Surcharge - Jate provisional filling fod or cover sheet.						
1251 120 2251 60 Extension for reply within first month							
1252 460 2252 230 Extension for raply within accord month 1253 1,050 2253 525 Extension for raply within third month		]					
1254 1,640 2254 820 Extension for reply within fourth month 1255 2,230 2255 1,115 Extension for reply within fifth month			·				
1255 2,230 2255 1,115 Extension for reply within fifth month 1401 510 2401 255 Notice of Appeal							
1402 510 Z402 255 Filing a briof in support of an appeal 1403 1,030 2403 515 Request for oral hearing							
1451 1.510 2451 1.510 Petition to institute a public use proceeding							
1450 130 2460 130 Patitions to the Commissioner 1807 50 1807 50 Processing fee under 37 CFR 1.17(q)			.				
1808 180 1806 180 Submission of Information Disclosure Stmt							
1809 810 1809 405 Filing a submission after final rejection (37 CFR § 1				į			
1810 810 2810 405 For each additional invention to be examined (37 CFR § 1 129(b)) Other fee (apocity)							
SUBTOTAL (2)		(\$)					
SUBMITTED BY	Registration No.		Сотр	lete (if applicable)			
Name (Print/Typa) Ashley R. Essick	(Attorney/Agent)	55,515	Telephone	(303) 740-1980			
Signature Ash lung Salic?			Date	08/18/08			

## RECEIVED CENTRAL FAX CENTER

AUG 1 8 2008

Our Docket No: 42390.P9765X

RESPONSE UNDER 37 C.F.R. § 1.116

– EXPEDITED PROCEDURE -EXAMINING GROUP 2100

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Anderson

Examiner: Chankong, Dohm

Art Group: 2152

Application No.: 09/895,557

Filed: June 29, 2001

For: Method and Apparatus for Message

Escalation by Digital Assistants

RESPONSE AFTER FINAL

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Final Office Action mailed June 16, 2008, applicant respectfully requests the Examiner to enter the following amendments and to consider the following remarks.

## CERTIFICATE OF FACSIMILE TRANSMISSION

t hereby certify that I am causing the above-referenced correspondence to be transmitted via facsimile to the United States Patent and Trademark Office at (571) 273-8300 on the date indicated below:

	August 18. 1	2008		
	Date of De	posit		_
	Shannon Ser	rruno		
Diannon	Name of Person Mailing Signature	8/18/08	· · · · · · · · · · · · · · · · · · ·	